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ABSTRACT

Because advances in medical science can lead to rapid changes in current health knowledge, a library collection of medical science materials can become dated rather quickly. This factor, as well as the many variables of library use and operation which impact the availability of current materials on the library shelves--loan periods, weeding habits, book display, and others--make assessment of the available collection an important task. To test a model that would provide information about the currency of the medical science collection available on the browsing shelves of a small to medium-sized public library, books in six subject classes within the medical science collection of the Parma-Snow Library, a branch of the Cuyahoga County Public Library (Ohio), were examined for date of publication over a period of 4 weeks. Approximately 43% of the titles examined in this period were found to be greater than 5 years old. Additionally, only 2% of the sample was published within the past year. This type of finding, determined by using very simple techniques requiring a minimum of staff time and resources, provides a collection manager with valuable information about the status of the browsing collection and signals areas of the collection which need attention to assure that current information is available to the browsing patron. (A copy of the data analysis worksheet and a 23-item bibliography are included as well as 21 end notes.) (Author/MAB)

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EVALUATING CURRENCY OF THE MEDICAL SCIENCES COLLECTION AVAILABLE ON PUBLIC LIBRARY SHELVES

A Master's Research Paper submitted to the
Kent State University School of Library Science
in partial fulfillment of the requirements
for the degree Master of Library Science

by

Peggy S. Everhart

June, 1991

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Because advances in medical science can lead to rapid changes in current health knowledge, a library collection of medical science materials can become dated rather quickly. This factor, as well as the many variables of library use and operation which impact the availability of current materials on the library shelves - loan periods, weeding habits, book display, and others - make assessment of the available collection an important task.

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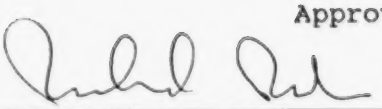
Adviser  Date 7-10-91

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I. INTRODUCTION

As part of the consumer health movement of recent decades, the demand for accurate and understandable health information has grown. No longer satisfied with the role of passive patient, consumers seek information which can help them become informed and responsible choice makers. Traditionally, physicians have been considered the main source of medical information for the individual consumer. A 1984 survey by Overlook Hospital in Summit, New Jersey revealed that 55 percent of those polled said a physician was their first choice when seeking health information. (1) But for reasons described elsewhere in the literature, some consumers are unwilling - or unable - to avail themselves of information from this source. As an alternative, many people look to the local library for health information. In the Overlook Hospital survey, 18 percent of respondents listed the public library as their first choice for medical information. An earlier survey of public use of libraries by Hays, Schearer and Wilson found that 39 percent of their sample would turn to libraries for information on health, emergencies and social services. (2) An unpublished report of a medium-sized branch of the Cuyahoga County Public Library shows that approximately 10 percent of that branch's adult non-fiction circulation is accounted for by medical science books. (3) These reports suggest that the public library is perceived as a source of health information and one that the public is willing to utilize.

As any person who reads the daily paper or watches the evening news is aware, advances in medical science lead to

changes in current health knowledge with an amazing frequency. What is considered an accepted mode of treatment for a medical condition one year, for example the use of fish oils to treat elevated blood lipids, may be refuted, altered, or found to have negative side effects the next year. (4) Or, in some instances, an entirely new finding will emerge which has not been previously known to the medical community, as was the case with the identification of the AIDS related virus.

In such a changing environment and with such consumer demand for information, maintaining a library collection which reflects current medical knowledge becomes a task requiring concerted attention.

According to Alan Rees in his book The Consumer Health Information Sourcebook, there is no shortage of health information available for consumers. (5) A flood of popular medical books, magazine literature, and newsletters exist on most subjects of interest to the questioning layperson. In the 1990 edition of this work, Rees lists some 750 books, 79 magazines and newsletters, more than 700 pamphlets, and hundreds of organizations and other sources of health information suitable for a public library collection. This bibliographic work suggests that current materials are available which can be considered for library acquisiton.

However, not only is purchasing current materials an issue for the library, but also having current materials on the shelves is an issue. For the patron who has recently learned of a

personal health problem, for example breast cancer, a visit to the library can produce information which may help her to understand her condition and the course to expect for management of the disease. Whether she walks out with materials that reflect the latest medical knowledge in this field or whether she takes home outdated information sources may depend entirely on what is available on the browsing shelves when she comes to visit. This poses an important question for the collection manager of a public library. When a patron visits the library to browse the medical science shelves, how current are the materials that the patron will find?

Shelf availability of current materials can be affected by many variables. From studies conducted primarily in academic libraries, it has been shown that older materials tend to circulate less often than more recently published items. (6) This effect is known as obsolescence or the aging of materials. In a field of knowledge such as medical science where the age of the item can be critical to the accuracy of the information provided, one must be concerned with the effect that such circulation patterns have on the availability of current materials on the shelves. If in a given setting the circulation of current materials is such that mainly older materials are what is usually available on the shelves for patron selection, then for the browsing patron, the collection may be an outdated one and one that potentially provides misinformation.

Other factors also impact the shelf availability of

materials. Weeding habits of the library staff, speed at which returned materials are reshelved, timeliness of integrating new acquisitions into the collection, special book displays, number of copies owned of a high demand title or subject area, loan periods - all of these are areas of concern when considering shelf availability. (7)

With such a multitude of variables that could negatively impact the availability of current medical science materials on the browsing shelves, it would be useful for the collection manager to have a method to assess just what is the impact of these factors. Is there a problem, or are present practices sufficient to maintain a collection of current materials on the shelves? It was toward development and testing of an assessment method which can be used to evaluate the currency of the browsing collection that this research project was directed.

Scope

The model developed in this study is designed to identify the currency of the medical sciences books available on the browsing shelves of a small to medium-sized public library. In the hope of promoting its use by busy public library staff, it is a model using intentionally simple techniques which require little staff time or other resources. The purpose is to provide evaluative information which can help the collection manager know if further investigation of collection practices is warranted. It is not designed to identify the specific practices which are influencing the collection under study. Other methodologies are

reported in the literature which are designed for these purposes.

The study was conducted during a one month period of regular library operation. This time period was chosen to cover the length of the longest loan period - three weeks - offered by the library under study. Potential cyclical, seasonal or other variations of usual circulation habits may not be accounted for by the findings. A library which can show through monthly and annual circulation figures that such variations are significant for the medical sciences collection may want to repeat the study process on a periodic basis to account for such fluctuations before drawing conclusions about the browsing collection. It is felt, however, that because it is of value to have current materials at any given time, a one month evaluation is adequate to present a picture of the impact of present collection management practices, regardless of what those practices may be.

Further, select subject areas within the medical sciences collection were examined for this study. This was not considered to be a representative sample of the entire medical collection which appeared on the shelves during the study. Such narrowing of the examination is believed to provide more fruitful information to the collection manager who may find that one subject area is quite current, yet another quite old. New acquisitions, weeding, or changes in reshelving procedures, for example, can then be focused on a particular subject area rather than guesses made about the currency of a subject area based on random figures of the entire medical sciences collection.

II. BACKGROUND AND REVIEW OF THE LITERATURE

Statements have been made by numerous authors regarding the need for medical science collections of public libraries to be current and accurate. Ellen Fecher, in her 1985 article "Consumer Health Information: A Prognosis," warns that public libraries, being new to the area of consumer health information collection development, must be dedicated to this task by pursuing assistance in locating materials which are appropriate to patron's needs and interests and provide sound information. Vaillancourt and Bobka identify several sources librarians might consult for selection purposes and list currency of the work as one evaluation criteria of materials review. (8) Rees and Janes, in discussing the InfoHealth Project in Cleveland, identify content as a major variable to consider in selection of a consumer health book, with content including the accuracy, validity, and currency of the work. (9) Similar selection criteria were used by Dalton and Gartenfeld in the CHIN Project of public libraries in the greater Boston area. (10)

An important study which stressed the evaluation of holdings rather than simply the selection criteria was conducted by Yellott and Barrier at the Onondaga County Public Library (OCPL) in Syracuse, New York in 1979. (11) The primary goal of the study was to evaluate the accuracy and currency of the health and medical information provided to patrons by the reference librarians at the OCPL. The methodology involved the documentation by librarians of the medical inquiries patrons

presented and the responses provided. Residents and faculty of the local Family Practice Residency Program then reviewed the librarian's documentation along with photocopies of information provided to the patron. The findings showed that of the 71 sources rated by the physicians, 70 percent were considered both current and sufficiently detailed to be considered accurate. Only 4 percent were rated as outdated to the extent of being misleading. A limitation to this study is that it only addressed librarian selections of materials, not looking at what the patron might have chosen unassisted. Its relevance to the present research project is that it established currency as a valid criteria in evaluating the quality of a medical sciences collection in a public library and showed that currency and accuracy are correlated as reflected by the physician's assessments.

It is interesting that in later comments made by Yellott in 1982 as the OCPL began focusing on collection development of circulating health information materials rather than just reference materials, she notes:

> Over half of the nearly 3,000 circulating health books [in the OCPL collection] were published before 1976 and should be considered likely candidates for the discard bin. (12)

This is one of few comments found in the literature regarding the weeding or discarding of items based on age due to the concern for the currency of the information provided. Most weeding studies and resulting criteria, such as those developed by Slote (13), focus on decreased use of materials as they age as

justification for weeding, with the goal of weeding being to free space for new acquisitions. Attempts to predict which titles will fall out of use and can therefore be relegated to storage or discard have been made by Fussler and Simon in their classic study of obsolescence at the University of Chicago in 1969 (14), Jain (15), Morse (16), and most recently in a public library setting by Danny P. Wallace (17).

Weeding based on use or circulation of an item is not a worthless concept, but it becomes a potential problem when high-use but outdated materials are maintained. This is certainly a concern in the area of medical science information. In her study of the circulation characteristics of new versus old non-fiction books conducted in six public libraries in the Chicago area in 1965, Elizabeth Mueller showed that while, on average, more new titles were in circulation than older ones, in many cases older titles had circulation characteristics similar to those of the new titles. (18) This finding was true in the Dewey 600 class, indicating that medical science materials may have been included in this phenomenon. This, indeed, is one of the potential hazards of subscribing to the philosophy: "If it circulates, keep it." (19)

It is the book by book examination outlined in the American Library Association's publication Evaluating and Weeding Collections in Small and Medium-sized Public Libraries: The CREW Method that uses date of publication as a weeding criteria and lends itself well to the evaluation of the currency of materials

on the shelf in a public library. (20) According to standards for weeding of particular Dewey classes, the age at which medical science materials ought to be considered for discard is three to five years. It would seem that if this methodology were implemented on the annual basis recommended in the guidelines, a collection of current medical science materials could be sufficiently maintained. However, as was pointed out earlier, because so many variables impact on the availability of materials being on the shelf at any given time, a more frequent and systematic review conducted over time is needed to provide information about not only how many titles are old, but also what is happening with the current materials. Do current books appear on the shelves?

Definitions and Assumptions

For the purposes of this study, the following definitions apply:

Medical science materials - Books only, in Dewey class 610.

Browsing shelves - Those areas which contain regular circulating medical science books. This does not include items in reference areas, special displays, or sorting areas within the library.

Collection manager - The person or persons charged with the responsibility for selecting, evaluating and weeding the medical science collection.

Current - Medical science materials with the most recent copyright date listed within the past 5 years.

Subject class - A specific subject area within a larger Dewey

classification e.g. 618.1 Gynecology. May also be referred to simply as class.

It is assumed that small to medium-sized public libraries have browsing shelves open for patron selection and that indeed, patrons in these libraries tend to browse for medical science materials. (21) No assumptions are made, however, regarding their criteria for selection of these materials other than availability on the shelf at the time of the patron's visit.

III. METHODOLOGY

The Parma-Snow Library, a medium-sized branch of the Cuyahoga County Public Library in northeast Ohio, with holdings of approximately 80,000 and monthly circulation of medical sciences books in the adult collection averaging 700, was the testing site of the model developed in this study. The loan period for books in this library is three weeks. An examination of books in the adult medical sciences collection which appeared on the browsing shelves was the subject of the materials review.

Each book on the shelves in six selected Dewey ranges which correspond with particular health information subjects was examined for date of publication as based on the most recent copyright date printed on the verso of the title page. Duplicate titles were counted only once. A tally was kept of the number of books published in each year represented by the sample using the data collection form displayed in Appendix A. Shelves were examined by the author over four consecutive weeks during the months of May and June, 1991, on each Tuesday afternoon, Thursday evening, and Saturday morning. An examination was not done on one Saturday because the library was closed for a holiday. A total of eleven examinations were conducted during the study period.

Results of each examination were combined and a total frequency distribution of the dates of publication was calculated for each subject class. Additionally, summary figures of the time required to complete each examination and the number of

books examined in each class on each day was tabulated. All averages and percentages reported in the study were rounded to the nearest whole number. The implications of these data are discussed as regards the currency of the materials examined in the study and the efficacy of the model developed for this research project.

Following are the subject classes which were included in the study. As reflected in The Consumer Health Information Sourcebook mentioned earlier, current materials are known to exist on these subjects, reflecting both availability for inclusion in the library's collection and some popularity of the subject matter among consumers. A pre-examination of the study sample conducted in April, 1991, also indicated that books on these subjects were owned by the Parma-Snow Library.

616.994	Cancer
616.97	Diseases of the immune system (includes allergies and AIDS
616.852	Neuroses (includes eating disorders, phobias, and chronic fatigue syndrome)
616.7	Diseases of the musculoskeletal system (includes osteoporosis and arthritis)
615.1	Drugs (includes popular works on therapuetic drug use)
618.1	Gynecology (includes endometriosis, menopause, hysterectomies, and diseases of the breast)

IV. FINDINGS

A total of 1092 books was examined over the four-week course of this study. The average number of titles examined each day was 99, with 17 the average for each of the six subject classes. The longest amount of time it took to complete an examination of all six subject classes was 18 minutes.

Table 1.--Number of Books Examined Each Day by Subject Class with Length of Time Spent on Each Day's Examination

Subject Class	Day 1	2	3	4	5	6	7	8	9	10	11	Total	Avg
615.1	14	18	16	19	20	20	20	20	20	20	19	206	19
616.7	14	16	16	17	17	16	16	15	17	17	18	179	16
616.852	16	16	18	22	21	27	31	30	29	31	31	272	25
616.97	5	6	9	10	10	10	10	10	13	14	14	111	10
616.994	15	15	15	10	8	12	12	12	12	12	12	136	12
618.1	17	17	17	17	17	18	19	18	18	15	15	188	17
Total	81	88	91	94	93	103	108	105	109	109	109	1092	99
Time in Minutes	17	15	16	--	15	16	16	16	17	17	18	164	16

Because each title within a subject class was examined, the figures in table 1 indicate that there was a change in the number of books on the shelves within each class during the study period. And, when the number of books examined is compiled for all six subject classes and listed by year of publication, it can be seen that the availability of books published in a given year also changed throughout the study period within these subject classes (see table 2).

Table 2.--Total Books Examined Each Day by Year of Publication

Year	Day 1	2	3	4	5	6	7	8	9	10	11	Total	Avg
1991	1	2	1	1	3	3	3	3	3	3	3	26	2
1990	4	5	5	8	7	8	9	9	10	10	10	85	8
1989	13	16	18	19	19	17	17	16	18	15	15	183	17
1988	15	16	15	16	16	19	19	18	17	19	19	188	17
1987	10	13	13	13	11	14	14	13	14	16	16	147	13
1986	10	9	9	8	8	10	11	11	12	12	12	112	10
1985	7	7	7	7	8	6	7	7	9	9	9	83	8
1984	5	5	6	6	6	7	7	7	9	7	7	72	7
1983	6	6	6	6	6	7	8	8	7	6	6	72	7
1982	3	3	3	3	2	4	5	4	3	3	3	36	3
1981	2	2	2	2	2	2	2	2	1	2	2	21	2
1980	1	2	2	2	2	2	2	2	2	2	2	21	2
1979	2	2	2	2	2	2	2	2	2	3	3	24	2
1978	1	0	0	0	0	0	0	1	0	0	0	2	0
1977	0	0	0	0	0	0	0	0	0	0	0	0	0
1976	1	0	1	1	1	1	1	1	1	1	1	10	1
1975	0	0	0	0	0	0	0	0	0	0	0	0	0
1974	0	0	0	0	0	0	0	0	0	0	0	0	0
1973	0	0	0	0	0	0	0	0	0	0	0	0	0
1972	1	0	1	1	1	1	1	1	1	1	1	10	1

Both of these findings support the premise that an examination over time is needed when assessing the currency of the medical science collection available to the browsing patron. A one-time examination of books in this popular classification would not reflect the changes in shelf availability indicated by the figures in this study.

Frequency distributions calculated for each subject class indicate the currency of the books in that class which appeared on the shelves during the study period. As tables 3-8 show, the publication date of the oldest title examined was 1972, located in the subject class 616.852 (Neuroses). Only two subject

classes - 615.1 (Drugs) and 618.1 (Gynecology) - had any titles on the browsing shelves with 1991 publication dates.

Table 3.--Frequency Distribution-Drugs 615.1

Date of Publication	Frequency Distribution	Percentage
1991	20	10
1990	38	19
1989	39	19
1988	54	26
1987	11	5
1986	11	5
1985	33	16
1984 and earlier	--	--
Total	206	100

Table 4.--Frequency Distribution-Musculoskeletal 616.7

Date of Publication	Frequency Distribution	Percentage
1991	--	--
1990	--	--
1989	65	36
1988	39	22
1987	16	9
1986	--	--
1985	30	17
1984	8	4
1983	--	--
1982	11	6
1981	--	--
1980	10	6
1979 and earlier	--	--
Total	179	100

Table 5.--Frequency Distribution-Neuroses 616.852

Date of Publication	Frequency Distribution	Percentage
1991	--	--
1990	25	9
1989	24	9
1988	37	14
1987	64	23
1986	34	12
1985	5	2
1984	30	11
1983	19	7
1982	11	4
1981	--	--
1980	--	--
1979	2	1
1978	1	0
1977	--	--
1976	10	4
1975	--	--
1974	--	--
1973	--	--
1972	10	4
1971 and earlier	--	--
Total	272	100

In all six classes, at least 21% of the titles examined had last copyright dates more than five years old (see table 9). The highest percentage was in the subject class 616.97 (Diseases of the Immune System) where 65% of the titles were more than five years old. In two subject classes - 616.97 (Diseases of the Immune System) and 616.994 (Cancer) - 10% or more of the titles were greater than ten years old. By The Crew Method guidelines for weeding medical science materials mentioned earlier, 42% of the titles are eligible for discard by the five year standard.

Table 6.--Frequency Distribution-Immune System 616.97

Date of Publication	Frequency Distribution	Percentage
1991	--	--
1990	--	--
1989	26	23
1988	9	8
1987	5	4
1986	14	13
1985	4	4
1984	13	12
1983	22	20
1982	7	6
1981	--	--
1980	--	--
1979	11	10
1978 and earlier	--	--
Total	111	100

Table 7.--Frequency Distribution-Cancer 616.944

Date of Publication	Frequency Distribution	Percentage
1991	--	--
1990	--	--
1989	11	8
1988	28	21
1987	18	13
1986	31	23
1985	--	--
1984	9	7
1983	--	--
1982	6	4
1981	11	8
1980	11	8
1979	11	8
1978 and earlier	--	--
Total	136	100

Table 8.--Frequency Distribution-Gynecology 618.1

Date of Publication	Frequency Distribution	Percentage
1991	6	3
1990	22	12
1989	18	10
1988	22	12
1987	33	18
1986	22	12
1985	11	6
1984	12	6
1983	31	16
1982	1	0
1981	10	5
1980 and earlier	--	--
Total	188	100

Table 9.--Cumulative Percentage of Titles Greater Than Five Years Old by Subject Class

Subject Class	Percentage
615.1 (Drugs)	21%
616.7 (Musculoskeletal)	33%
616.852 (Neuroses)	45%
616.97 (Immune System)	65%
616.994 (Cancer)	58%
618.1 (Gynecology)	45%

V. SUMMARY AND CONCLUSIONS

A demand for health and medical information by patrons of public libraries has created an area of concern which needs to be on the minds of collection managers working in these public facilities. How current is the medical science collection presented to the browsing patron visiting the library for health information? Because the medical community generates new information on topics of interest to consumers at a rate equalled by few other fields of study, maintaining a library collection which reflects current knowledge can be a challenge, and one which must be met if the library is to be of service to its clientele. Not only must new acquisitions be current and accurate, but the materials which actually appear on the shelves from which patrons make their selections must also reflect the most recent information.

Much of the library literature related to these concerns addresses the issue of collection development from the point of acquisitions. Little attention has been paid the matter of maintaining a current collection on the shelves. Because a multitude of variables can impact shelf availability - turnover rate, obsolescence, weeding practices, to name a few - a simple method is needed to assess the status of the browsing collection that will reflect the impact of these various factors. From such an assessment, the need for further investigation or action can be determined. The model developed and tested in this study was designed to serve that purpose.

Using a simple examination methodology which required an average of three minutes per seventeen titles to complete, it was possible to determine the percentage of titles, by year of publication, that appeared on the browsing shelves in selected medical science subject classes in a medium-sized public library. A standardized tally sheet, a pen, and a person to examine the books were the only resources needed to complete the examination. Data analysis was completed using basic statistical measures and a hand-held calculator. The methodology is practical and accessible to even the busiest collection manager. Because no technical skills were needed to do the book examination, a volunteer or library page could be used for this purpose, thereby further reducing the demand on the collection manager's time.

In the library used to test the model, the data showed that across all six subject classes studied, only a small percentage - 2% - of the titles appearing on the shelves were published within the past year, and that 43% were more than five years old. Extremes were apparent in a few of the subject classes, such as Cancer and Diseases of the Immune System, where no books published within the past two years appeared on the shelves throughout the four-week period, and 65% and 58%, respectively, were more than five years old. Such findings provide valuable information to the collection manager about the books which actually appear on the shelves in each of the selected subject classes and should serve as a signal to further investigate these collections.

It is known that this library has a standard procedure of displaying new medical science books along with other new titles in a special area at the front of the library away from the regular collection. This would seem to explain at least some of the reason for the low rate of appearance of current materials on the regular browsing shelves and may be a place for the collection manager to start when considering ways to improve the currency of the browsing collection. Additionally, immediate weeding of old titles could be considered to reduce the potential of providing misinformation for the browsing patron, and a review of usual weeding procedures conducted to determine a plan to avoid delays in weeding outdated material. Perhaps priority reshelving assignments for pages need to be considered for these parts of the collection to assure that returned items do not linger in sorting areas. The shelf list could also be examined to determine if current titles are actually owned by the library and acquisitions made accordingly.

A limitation of this model is that it does not identify which specific variables are impacting the shelf availability of these medical science books. A model which uses titles on the shelf list as the basis for the book examination and involves an additional step of tracking the location or status of items which do not appear on the shelves - are they in circulation, on sorting shelves, missing? - would provide much of this additional information. Future testing of such models is recommended to expand the pool of knowledge about these special collections.

ENDNOTES

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APPENDIX
Data Collection Form

SUBJECT: (circle one) 615.1, 616.7, 616.852, 616.97, 616.994
618.1

DATE:_____ DAY:_____ TIME:_____

TOTAL BOOKS EXAMINED:_____

Year of Publication	Number	Total
1991		
1990		
1989		
1988		
1987		
1986		
1985		
1984		
1983		
1982		
1981		
1980		
1979		
1978		

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